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Customer No. 000959

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Case Docket No. ATA-286

THE ASSISTANT COMMISSIONER FOR PATENTS
Box Patent Application
Washington, D.C. 20231

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I hereby certify that this transmittal letter and the papers referred to as being enclosed therein are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Signature Larry Taylor

Please Print Name of Person Signing

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Jonathan L. Goodwin, Gary A. Jordan, and Peter H. Gingras

For: COVERED STENT AND METHOD OF COVERING A STENT

Enclosed are:

This is a request for filing a continuation divisional application under 37 CFR 1.53(b), of pending prior application serial no. _____ filed on _____ entitled _____.

12 pages of specification, 2 pages of claims, 1 pages of abstract.

6 (Figs. 1, 2, 3, 4, and 5A, 5B, 5C) sheets of informal drawings.

An unexecuted Declaration, Petition and Power of Attorney.

An assignment of the invention to _____. A recordation form cover sheet (Form PTO 1595) is also enclosed.

A verified statement to establish small entity status under 37 C.F.R. 1.9 and 37 C.F.R. 1.27.

Other _____

The filing fee has been calculated as shown below:

(Col. 1)	(Col. 2)
FOR:	NO. FILED
BASIC FEE	//////////
TOTAL CLAIMS	10 - 20 = 0
INDEP. CLAIMS	2 - 3 = 0
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED	

* If the difference in Col. 2 is less than zero,
enter "0" in Col. 2.

SMALL ENTITY	
RATE	FEES
//////////	\$ 345.00
x 9=	\$
x 39	\$
+130	\$
TOTAL	\$345.00

OTHER THAN SMALL ENTITY	
OR	RATE
OR	////////// \$
OR	x 18= \$
OR	x 78 \$
OR	+260 \$
OR	TOTAL \$

Please charge my Deposit Account No. _____ in the amount of \$.
A duplicate copy of this sheet is enclosed.

A check in the amount of \$ to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. _____.
A duplicate copy of this sheet is enclosed.

Any additional filing fees required under 37 C.F.R. 1.16.

Any patent application processing fees under 37 C.F.R. 1.17.

The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. _____.

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Any patent application processing fees under 37 C.F.R. 1.17.

The issue fee set in 37 C.F.R. 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 C.F.R. 1.311(b).

Any filing fees under 37 C.F.R. 1.16 for presentation of extra claims.

A check in the amount of \$ _____ to cover the recording of assignment documents is also enclosed.

Address all future communications (May only be completed by applicant, or attorney or agent of record) to Kevin J. Canning, Esq. at Customer Number: **000959** whose address is:

Lahive & Cockfield, LLP
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Date: July 28, 2000

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